U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 **LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2005

This report is mandatory under P. L. 96-257, as amended. Failure to coreply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number 1 - 759	2. Fiscal Year Covered From:			
, ·	1 / 1 / 2004 Through: 12 / 31 / 2004			
3. Name and address of person filing.	4. Name, file number, and address of labor organization.			
Name Scatt	Name Steat Matal Workers Local Union 359			
	Labor Organization File Number 63(64)			
P.O. Box. Bidg Room No., if any	P.O. Box, Building and Room Number, if any			
Sheet 10104 E. Plata Ave.	Street 2604 B. Adems St.			
City News	Cay Phoensix			
State Arixons ZIP Code + 4 85212-2199	State Artizona ZIP Code + 4 BS036-1494			
5. Position in labor organization. Business Representative				
A. Held an interest in, engaged in transactions (including loans) with, or a monetary value from an employer whose employees your organization.	derived income or other economic benefit of the represents or is actively seeking to represent.			
monetary value from an employer whose employees your organization	on represents or is actively seeling to represent.			
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.			
Name				
Trade Name, if any				
P.O. Box, Bidg., Room No., If any	Th A			
Steant	7.b. Areount.			
City				
State ZiP Code + 4	ing and definition of the second control of			
Sign	aftire			
16. Signature and verification. The undersigned deciares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the algoratory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)				
Signed Authority	On 5 602-527: 0428 Days Talephone Number			
Form I M-201 (2005)	180010010 1800000			

Name of Person FMing Scott Holly	File Number U-			
B. Hald an interest in or derived income or economic benefit with monatary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose amployees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
5. Name and address of Business (including trade name, if any).	9. Business deals with:			
Name Sheet Metal Workers Trust Funds of No. Callif	888 . J.J 6	al		
Trade Name, if any:	a. Labor Organiza D. Trust	ior		
P.O. Box, Bidg., Room No., # any	с, Етрюум			
Street 111 N. Sepulveda Elvif \$100				
City Manhattan Beach State California ZP Code+4 90257-6861				
Company Compan				
10, if 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such deal	ng. Pension fund attending meeting		
Name Sheat Metal Morkers Trust Funds of So Calif	12/15-16/04	FIGURES LARGE MANAGEMENT COMMISSION		
Trade Name, if any:				
P.O. Box, Bidg., Room No., # sny				
Street III N. Sepulveda Blvd. #199	11.b. Approximate dollar vali	.e of such dealing.		
City Maschatten Beach	12.a. Nature of interest hel	ran en lance de como de la pelen districação de la Paria de Sanda de Caraca de Caraca de Caraca de Caraca de C		
State California ZIP Code + 4 50267-6861	Reimburgement for	lunch at meetings,		
	12.b. Amount.	Sion		
C. Received from any employer (other than an employer covered unde	r parts A and 8 above)			
or from any labor relations consultant to an employer any payment of money	or other thing of value.			
 Name and address of Employer or Labor Relations Consultant (including trade name, if any). 	14.a. Nature of payment.			
Name				
Trade Name, if any:				
P.O. Box, Skig., Room No., if any				
Street				
Chy				
State ZIP Code + 4				
13.b. is the Business an Employer or Consultant ?	14.b. Amount of payment.			

Name of Person Filing	Scott	Holly
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File Number U-

Part & Continuation Page

8. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or lessing to, or otherwise dealing with the business of an employed whose employeds your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or lessing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

	E
8. Name and address of Business (including trade name, if any).	8. Business deals with:
Name Sheet Metal Borbers Trust Funds of So Calif	a. Labor Organization
Trade Name, if any:	
P.O. Box, Bidg., Room No., if any	b. Trust
Street 111 N. Sepulyeds Blvd. Blue	c. Employer
Chy Manhatten Beach	
State California ZIP Code + 4 90267+6961	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.s. Nature of such dealing.
Name Sheet Metal Morkeys Trust Funds of So. Calif	Trustee for Tucson Fension fund attending meeting 10/13-14/04.
Trade Name, if any:	
P.O. Box, Bidg., Room No., # any	
Street 111 N. Sepulveda Slvd. #180	
Cay Manibactian, Beach	
State California ZIP Code + 4 86267 6861	11.tr. Approximate dollar value of such dealing.
	12.a. Nature of interest held or income received.
	Reimburgement for room/meals at meeting.
	12 b. Amount. 6809

Name of	Регвол	Filing	Scott	HALL

File Number U-

Part S Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leading to, or otherwise dealing with the business of an employer whose employers your labor organization represents or is activally seeking to represent, or (2) any part of which consists of buying from or selling or leading directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

	Ž A Bu-žu JJu-vide	
Name and address of Business (including trade name, if any).	9. Business deals with:	
Namo Sheet Metal Workers Trust Funds of Bo: Calif	a. Labor Organization	
Frade Name, if any:		
P.O. Box, Bidg., Room No., Fany	b. Trust	
Street 111 N. Sepulveds Bivd. #186	c. Employer	
Cay Manhattan Beach		
State California ZIP Code + 4 96267-6881		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Sheat Metal Workers Trust Funds of So. Calif	Trustee for Tubson Pension fund att 1/17-18/64	ending meeting
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street 111 W. Sepulveda: Blvd. #188		
Cay Manhatran Beach		
State Call Forting 21P Code + 4 90287-6861	11.b. Approximate dollar value of such dealing.	
	12.s. Nature of interest held or income received.	
	Reimbursement for room/meals at mee	e Lagra
	12.b. Amount.	\$226
	4	edenda a compania de la compania de

Name	of	Posson	Filing	Scott	Holls

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

Name Sheef Metal Workers Truet Punds of Sci Calif Trade Name, Fany P.O. Box, Bidg., Room No., Fany Street 111 N. Septilyests Blyd., \$100 City Sembatten Beach State California ZIP Code + 4 Sg267-6881 11. R. Nature of such dealing. Truetee for Tucason Praysion finite attending meeting \$128. Septily seems \$128. Septily	8. Name and address of Business (including trade name, if any).	S. Business deals with:
Street 111 N. Septitiveds 21vd \$108 City Manhattan Seach State California ZiP Code + 4 \$6267-6851 10. #9.b. or 9.c. is checked give trust or employer's name. Name Sheet: Nettal Morker's Trust Funds of So. California Sylvation fund attenting meeting 5/15-17/0% Trade Name, # any: P.O. Box, Bidg., Room No., # any Street 112 N. Septitiveds 51vd \$1000 Chy Manhattan Beach State California ZiP Code + 4 90767-5861 11.b. Approximate dollar value of such dealing. 12.s. Nature of interest held or income received.	Namo Sheet Metal Workers Trust Sands of So. Cellf	Section 1
State California ZiP Code + 4 58267-6861 10. # 9.b. or 9.c. is checked give trust or employer's name. Name Sheet Metal Morkers Trust Punds of So. Calif. Trade Name, # any: P.O. Box, Bidg., Room No., # any Street 112 % Sejoulveds Blord \$100 Chy Manbattan Beach State California ZiP Code + 4 90267-6861 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received.	***************************************	***************************************
Name Sheet Petal Horkers Trust Punds of So. Calif. Trade Name, # any P.O. Box, Bidg., Room No., # any Street 112 N Sepulyedia blvd. #100 Chy Manhattan Beach State California: ZIP Code + 4 80267-6861 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received.	(1000 1	
P.O. Box, Bidg., Room No., If any Street 112 / N Sepul Yedia (\$100) Chy Manibat Lan Beach State Call Formia	1/2/4/4/4/4/4/4/4/4/4/4/4/4/4/4/4/4/4/4/	Trustee for Fuceon Pension fund attending meeting
Cay Manhatitan Beach State Call Formia ZIP Code + 4 80767-6862 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received.	V*************************************	
State California ZIP Code + 4 (90267-6861) 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received.		
		2/60/3/3/3/3/3/3/3/3/3/3/3/3/3/3/3/3/3/3/
12.b. Amount. 35		Reinistrement for room/neals at meeting.